§ 201.58

shall be stated in the appropriate section of the labeling for the drug. If the pertinent animal data cannot be appropriately incorporated into other sections of the labeling, this section may be used.

"Clinical Studies" and "References". These sections may appear in labeling in the place of a detailed discussion of a subject that is of limited interest but nonetheless important. A reference to a specific important clinical study may be made in any section of the format required under §§ 201.56 and 201.57 if the study is essential to an understandable presentation of the available information. References may appear in sections of the labeling format, other than the "Clinical Studies" or "References" section, in rare circumstances only. A clinical study or reference may be cited in prescription drug labeling only under the following conditions:

(1) If the clinical study or reference is cited in the labeling in the place of a detailed discussion of data and information concerning an indication for use of the drug, the reference shall be based upon, or the clinical study shall constitute, an adequate and well-controlled clinical investigation under §314.126(b) of this chapter.

(2) If the clinical study or reference is cited in the labeling in the place of a detailed discussion of data and information concerning a risk or risks from the use of the drug, the risk or risks shall also be identified or discussed in the appropriate section of the labeling for the drug.

[44 FR 37462, June 26, 1979, as amended at 55 FR 11576, Mar. 29, 1990; 59 FR 64249, Dec. 13, 1994]

EFFECTIVE DATE NOTE: At 62 FR 45325, Aug. 27, 1997, § 201.57 was amended by adding paragraph (f)(10), effective Aug. 27, 1998.

# §201.58 Requests for waiver of requirement for adequate and well-controlled studies to substantiate certain labeling statements.

A request under \$201.57(b)(2)(ii), (c)(2), (c)(3)(i), (c)(3)(v), (f)(9), and (g)(4) for a waiver of the requirements of \$314.126(b) of this chapter shall be submitted in writing as provided in

§314.126(b) to the Director, Center for Drug Evaluation and Research, Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20587, or, if applicable, the Director, Center for Biologics Evaluation and Research, 8800 Rockville Pike, Bethesda, MD 20892. The waiver shall be granted or denied in writing by such Director or the Director's designee.

[55 FR 11576, Mar. 29, 1990]

## §201.59 Effective date of §§201.56, 201.57, 201.100(d)(3), and 201.100(e).

- (a) On and after December 26, 1979, no person may initially introduce or initially deliver for introduction into interstate commerce any drug to which §§ 201.56, 201.57, 201.100(d) (3) apply unless the drug's labeling complies with the requirements set forth in the regulations, with the following exceptions:
- (1) If the drug is a prescription drug that is not a biologic, not subject to section 505 of the act (21 U.S.C. 355), and not subject to section 507 of the act (21 U.S.C. 357), §§ 201.56, 201.57, and 201.100(d)(3) are effective on April 10, 1981.
- (2) If the drug is a prescription drug that on December 26, 1979 is (i) a licensed biologic, (ii) a new drug subject to an approved new drug application or abbreviated new drug application under section 505 of the act or (iii) an antibiotic drug subject to an approved antibiotic form, §§ 201.56, 201.57, and 201.100(d)(3) are effective on the date listed below for the class of drugs to which the drug belongs. Dates are also listed below for the submission of supplemental applications, amendments, and license changes.
- (3) If the drug is approved after December 26, 1979 but is a duplicate of a drug approved on or before that date (for example, a drug approved under an abbreviated new drug application or an antibiotic form), §§ 201.56, 201.57, and 201.100(d)(3) are effective on the date listed below for the class of drugs to which the drug belongs. Dates are also listed below for the submission of supplemental applications, amendments, and license changes.

Effective	Revised la- beling due	Drug class	Mail routing code	
		Biologics		
Nov. 1, 1982 Do Nov. 1, 1982 1 Do Do	Nov. 1, 1980 do Nov. 1,1980 <sup>2</sup> dododo	Bacterial vaccines and antigens with no U.S. standard of potency Skin test antigens	HFB-240 HFB-240 HFB-240 HFB-240 HFB-240 HFB-240	
		New Drugs and Antibiotic Drugs	TII B=240	
Nov. 1, 1982 Do	Nov. 1, 1980 do	Antiarrhythmics	HFD-110 HFD-110, HFD-510, and HFD-160	
Do	do	Anticonvulsants	HFD-120	
Do Do	dodo	Adrenal corticosteroids	HFD-510 and HFD-150 HFD-520	
Do	do	Scabicides	Do.	
Do	do	Pediculicides	Do.	
Do	do	General anesthetics	HFD-160	
Dec. 1, 1982 Do	Dec. 1, 1980	Antivirals  Dermatologics	HFD-520 Do.	
Jan. 1, 1983	Jan. 1, 1981	Glaucoma ophthalmics	HFD-520	
Do	do	Topical otics	Do.	
Feb. 1, 1983	Feb. 1, 1981	Antispasmodics	HFD_110	
Do	do	Anticholinergics	Do.	
Do Do	dodo	Diuretics	Do. HFD-120	
Do	do	Alcohol antagonists	Do.	
Do	do	Antipsychotics/antimanics	Do.	
Do	do	Androgens	HFD_510	
Do Do	do	Anabolic steroids	Do.	
Do	dodo	Hyperlipidemia	Do. HFD-520	
Do	do	Antigout	HFD-150	
Mar. 1, 1983	Mar. 1, 1981	Vaginal antibiotics	HFD-520	
Apr. 1, 1983	Apr. 1, 1981	Cephalosporins	HFD-520	
May 1, 1983	May 1, 1981	General analgesics	HFD-120	
Do	do	Anterior pituitary hormones	HFD-510	
Do Do	dodo	Hypothalamic hormones	Do. Do.	
Do	do	Mydriatic ophthalmics	HFD-520	
Do	do	Cycloplegic ophthalmics	Do.	
Do	do	Radiopharmaceuticals, diagnostic	HFD-150	
Do	do	Radiopharmaceuticals, therapeutic	Do.	
Do	do	Contrast agents diagnostic radiopaque	Do.	
Do Do	dodo	Local anesthetics	HFD-160 Do.	
June 1, 1983	June 1, 1981	Antifungals	HFD-520	
July 1, 1983	July 1, 1981	Antidiarrheals	HFD-110	
Do	do	Cardiac glycosides	Do.	
Do	do	Sedatives	HFD-120	
Do Do	dodo	Hypnotics Tetracyclines	Do. HFD-520	
Aug. 1, 1983	Aug. 1, 1981	Calcium metabolism	HFD-510	
Do	do	Vitamins and minerals	Do.	
Do	do	Antiinfective ophthalmics	HFD_520	
Do	do	Antiinflammatory ophthalmics	Do.	
Sept. 1, 1983 Do	Sept. 1, 1981	Antihypertensives    Drugs indicated for extrapyramidal movement disorders	HFD-110   HFD-120	
Do	do	Antiprotozoals	HFD-120 HFD-520	
Oct. 1, 1983	Oct. 1, 1981	Penicillins	HFD-520	
Nov. 1, 1983	Nov. 1, 1981	Blood glucose regulators (except sulfonylureas)	HFD-510	
Oct. 9, 1984	July 10, 1984	Sulfonylurea blood glucose regulators	HFN-130	
Nov. 1, 1983	Nov. 1, 1981	Drugs indicated for parenteral nutrition	HFD-510 and HFD-160	
Do Do	dodo	Drugs indicated for enteral nutrition	Do. HFD-520	
Do	do	Immunomodulators	HFD-150	
Dec. 1, 1983	Dec. 1, 1981	Anticoagulants	HFD-110	
Do	do	Thrombolytics	Do.	
Do	do	Drugs indicated for acid peptic disorders	Do.	
Do	dodo	Antidepressants	HFD-120 Do.	
	uU	Drugo mulcated for orderal muscle hyperactivity	, Do.	

#### § 201.60

Effective	Revised la- beling due	Drug class	Mail routing code
Do	do	Sulfonamides and related sulfa compounds	HFD-520
Do	do	Dental preparations	HFD-160
Jan. 1, 1984	Jan. 1, 1982	Miscellaneous antibacterials	HFD-520
Feb. 1, 1984	Feb. 1, 1982	Drugs indicated for infertility	HFD-510
Do	do	Thyroids	Do.
Do	do	Antithyroids	Do.
Do	do	Polymyxins	HFD-520
Do	do	Antineoplastics	HFD-150
Mar. 1. 1984	Mar. 1. 1982	Urinary tract stimulants	HFD-110
Do	do	Urinary tract relaxants	Do.
Do	do	Antimigraine	HFD-120
		Antimycobacterials (including antileprosy)	HFD-520
Do	do	Adjuncts to anethesia	HFD-160
Apr. 1, 1984	Apr. 1, 1982	Antianginals	HFD-110
Do	do	Laxatives	Do.
Do	do	CNS stimulants	HFD-120
Do	do	Anorexiants	Do.
Do	do	Chloramphenicol and derivatives	HFD-520
May 1, 1984	May 1, 1982	Drugs indicated for vertigo/motion sickness/vomiting	HFD-120
Do	do	Antidiuretics	HFD-510
Do	do	Contraceptives	Do.
Do	do	Macrolides	HFD-520
Do	do	Lincosamides	Do.
Do	do	Antiarthritics	HFD-150
Do	do	Antitussives	HFD-160
Do	do	Expectorants	Do.
Do	do	Inhalants	Do.
June 1, 1984	June 1, 1982	Urinary tract antiseptics	HFD-520
July 1, 1984	July 1, 1982	Chelating agents/heavy metal antagonists	HFD-110
Do	do	All other gastrointestinal drugs	HFD-110
Do	do	Antianxiety	HFD-120
Do	do	Drugs indicated for myasthenia gravis	HFD-120
Do	do	All other antiinfective drugs	HFD-520
Do	do	Bronchodilators/antiasthmatics	HFD-160
			HFD-510
Aug. 1, 1984 Do	Aug. 1, 1982	Uterine stimulants	HFD-510
Do	do		Do.
		Uterine relaxants	HFD-110
Sept. 1, 1984	Sept. 1, 1982	Drugs indicated for hypotension and shock	
Oct. 1, 1984	Oct. 1, 1982	All other cardiac drugs	HFD-110
Do	do	Nasal decongestants	HFD-160
lov. 1, 1984	Nov. 1, 1982	All other prescription drugs.	

<sup>1</sup>Except the effective date for all biological products reviewed generically by the advisory panel is 30 months after a final order is published under 21 CFR 601.25(g).

<sup>2</sup>Except the due date for all biological products reviewed generically by the advisory panel is 6 months after a final order is published under 21 CFR 601.25(g).

#### (b) Section 201.100(e) is effective April 10, 1981.

[45 FR 32552, May 16, 1980, as amended at 46 FR 7272, Jan. 23, 1981; 49 FR 14331, Apr. 11, 1984; 50 FR 8995, Mar. 6, 1985; 55 FR 11576, Mar. 29, 1990]

#### Subpart C—Labeling Requirements for Over-the-Counter Drugs

SOURCE: 41 FR 6908, Feb. 13, 1976, unless otherwise noted.

### §201.60 Principal display panel.

The term principal display panel, as it applies to over-the-counter drugs in package form and as used in this part, means the part of a label that is most likely to be displayed, presented, shown, or examined under customary conditions of display for retail sale.

The principal display panel shall be large enough to accommodate all the mandatory label information required to be placed thereon by this part with clarity and conspicuousness and without obscuring designs, vignettes, or crowding. Where packages bear alternate principal display panels, information required to be placed on the principal display panel shall be duplicated on each principal display panel. For the purpose of obtaining uniform type size in declaring the quantity of contents for all packages of substantially the same size, the term area of the principal display panel means the area of